

PART B - FEE(S) TRANSMITTAL

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30594 7590 09/21/2006

HARNESS, DICKY & PIERCE, P.L.C.
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Patty Giebler	(Depositor's name)
Patty Giebler	(Signature)
12-15-06	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/393,300	09/10/1999	MOHAMED ANISUR RAHMAN	2925-237P	2520

TITLE OF INVENTION: METHOD AND SYSTEM FOR DIRECTING A DATA MESSAGE IN A WIRELESS COMMUNICATIONS NETWORK INCLUDING MULTIPLE WIRELESS SYSTEMS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	12/21/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS	
PHAN, HUY Q	2617	370-328000	12/19/2006 EHAILE2 00000071 122325 09393300

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1	
2	
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE LUCENT TECHNOLOGIES INC. (B) RESIDENCE: (CITY and STATE OR COUNTRY)

MURRAY HILL, NJ 07974
STATE OF DELAWARE

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☐ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies _____

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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 12-2325 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Patty Giebler
Typed or printed name Patty Giebler

Date 12-15-06
Registration No. _____

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